

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (303) 740-1980

INTELLECTUAL PROPERTY LAW
 12400 WILSHIRE BOULEVARD, 7TH FLOOR
 LOS ANGELES, CA 90025

FACSIMILE: (303) 740-6962

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Deliver to: Vo, T. _____ | Art Group: 2821 _____

Company Name: USPTO _____

Facsimile No.: 703-872-9306 _____ Date: May 9, 2005

From: Gordon R. Lindeen III, Reg. No. 33,192 _____

Our Docket No.: 2213P022 _____ Number of pages _____ including this sheet.

Application: 10/663,104 _____ Filing Date: 9/16/2003

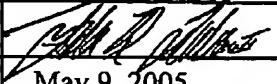
SubjectRemarks

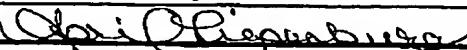
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TRANSMITTAL FORM		Application No.	10/663,104
(to be used for all correspondence after initial filing)		Filing Date	September 16, 2003
		First Named Inventor	Juan Jose Gonzalez
		Art Unit	2821
		Examiner Name	Vo, T.
Total Number of Pages in This Submission	11	Attorney Docket Number	2213P022

ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group	
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/>	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/>	
<input type="checkbox"/> PTO/SB/08			
<input type="checkbox"/> Certified Copy of Priority Document(s)			
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application			
<input type="checkbox"/> Basic Filing Fee			
<input type="checkbox"/> Declaration/POA			
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Gordon R. Lindeen III, Reg. No. 33,192 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 9, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	April Plepenburg		
Signature		Date	May 9, 2005
Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w) 06/04/2004. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450			

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete If Known

Application Number	10/663,104
Filing Date	September 16, 2003
First Named Inventor	Juan Jose Gonzalez
Examiner Name	Vo, T.
Art Unit	2821
Attorney Docket No.	2213P022

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	25	28*	=	0	x	Fee from below	=	Fee Paid
Independent Claims	3	5*	=	0	x	200.00	=	\$0.00
Multiple Dependent								

Large Entity

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	*Reissue Independent claims over original patent
1205	300	2205	150	*Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\\$)	0.00	

*or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,180	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1480	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)		SUBTOTAL (2)	(\\$)		

SUBMITTED BY

Complete (If applicable)

Name (Print/Type)	Gordon R. Lindeen III	Registration No. (Attorney/Agent)	33,192	Telephone	(303) 740-1980
Signature			(\\$)	Date	05/09/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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Examiner Name	Vo, T.
Art Unit	2821
Attorney Docket No.	2213P022

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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) | <input type="checkbox"/> Credit any overpayments |
| under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. | |

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	25	- 28*	= 0	X	60.00	=	Fee Paid
Independent Claims	3	- 3*	= 0	X	200.00	=	\$0.00
Multiple Dependent						=	\$0.00

Large Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
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1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$)

0.00

*or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
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1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,690	2254	765	Extension for reply within fourth month
1255	2,180	2255	1,080	Extension for reply within fifth month
1401	600	2401	250	Notice of Appeal
1402	600	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,610	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1808	180	1806	180	Submission of Information Disclosure Stmt
1809	780	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	780	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

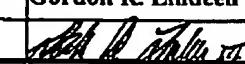
SUBTOTAL (2)

Fee Paid

(\$)

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Complete (if applicable)

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Signature				Date	05/09/05

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MAY 09 2005

Our Docket No: 002213.P022

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Gonzalez, J.)
Application No: 10/663,104)
Filed: September 16, 2003)
For: Pulsed Excitation of Inductively
Coupled Plasma Sources)

RESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed February 9, 2005, Applicant respectfully requests
the Examiner to enter the following amendment and to consider the following remark.

Attorney Docket No. 002213.P022
Application No. 10/663,104